

Contraceptive Security

Ready Lessons

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Raising Awareness and Commitment



U.S. Agency for
International Development

Contraceptive Security



Ready Lessons

Build multistakeholder commitment to contraceptive security by raising awareness and support.

What Can a Mission Do?

- ✓ Conduct an analysis to identify contraceptive security stakeholders.
- ✓ Hold a workshop to raise awareness and launch planning and implementation.
- ✓ Establish and support a coordinating committee.

Key Concept -

Contraceptive Security is a Commitment by Many

Lack of financing for supplies is often blamed for contraceptive shortages. However, the challenges to achieving contraceptive security come from many fronts. In most countries, the problem is not only one of financing, but also of disruptions and vulnerabilities in the many systems needed to ensure that contraceptives and condoms are **available** to people.

The very definition of contraceptive security – the words “choose”, “obtain”, and “use” – reflects its multidisciplinary nature. For customers to be able to **choose**, many sectors must be engaged, including those who

- provide information, education, and communication,
- influence behavior change,
- promote informed choice,
- reduce provider bias,
- strive to give customers meaningful choices at the places they frequent,
- develop supportive socio-cultural norms, and

- advocate for policies which enable such choices.

For customers to be able to *obtain* the products of their choice there must be a reliable operation of public and private sector supply chains delivering the “six rights”: the right product, in the right place, at the right time, in the right quantity, in the right condition, for the right price. The right price may be different for different clients. And, finally, the word *use* signals that contraceptive security is actually a customer-focused not a product-focused concept. It only exists when a person has the information to correctly use the products she or he has chosen, to their maximum effect and benefit.

Starting a Contraceptive Security Program

USAID Missions are critical to establishing a coordinated and collaborative approach to contraceptive security. Missions can begin by:

- *Identifying key stakeholders and organizations that have a role to play in contraceptive security initiatives.* Stakeholders often include the Ministries of Health and Finance, donors, multilateral organizations, NGOs, social marketing organizations, public and private sector providers, employers, supply chain managers, policy champions, advocacy groups, the media, and commercial manufacturers and distributors.
- *Identifying the relevant members of the Ministries of Health and Finance to convene an initial contraceptive security workshop.* This workshop can launch or revitalize interest to increase and maintain contraceptive and condom availability. It and other early consultations start a process for stakeholders to contribute to the contraceptive security dialogue. The workshop can:
 - ❖ provide a conceptual overview of contraceptive security;
 - ❖ describe in a preliminary way the current status of contraceptive security in the country;
 - ❖ identify mutual interests and common goals;
 - ❖ begin a process of consensus building around strategic priorities;
 - ❖ identify needs for further data collection and analysis;

- ❖ design initial terms of reference and dates for future meetings and events; and
- ❖ establish an activity timeline for completion of intermediate tasks and objectives.

Creating Multistakeholder Commitment to Contraceptive Security in Ghana

Donors – primarily USAID, UNFPA, and DFID – have been responsible for almost all of the contraceptives in Ghana. While their contributions have been relatively stable, Ghana’s needs are growing. The country, like others, is facing a projected annual funding gap of several million dollars before 2010.

In 2002, the Ministry of Health and partners decided to develop a strategy to avert future contraceptive shortages. They recognized from the start that the public sector, particularly donor contributions, could not by itself ensure Ghana’s contraceptive security. As a first step, the Ministry, with USAID support, convened a workshop that brought together stakeholders, including several Ministries, donors, NGOs, and technical agencies. Ghana’s Deputy Minister delivered the keynote address, underscoring the government’s commitment to improve family planning programs by making progress on contraceptive security. The workshop received good media coverage, with broadcasts on the national evening news and articles in leading national newspapers. Technical presentations:

- summarized Ghana’s contraceptive financing situation,
- explored the MOH’s five-year Programme of Work and Poverty Reduction Strategy, and
- detailed current efforts to improve contraceptive logistics.

Discussions were formed around the five strategic pillars of the health sector’s Programme of Work – financing, quality, efficiency, partnerships, and access. Participants agreed on program and policy priorities in each of these areas to achieve contraceptive security.

In addition to raising awareness about contraceptive security in Ghana and building consensus on priority issues among a

wide range of stakeholders, the workshop created the Interagency Coordination Committee for Contraceptive Security (ICC/CS). The Family Planning Coordinator in the MOH Reproductive and Child Health Unit (RCHU) was elected to lead the ICC/CS in the full development of a national strategy, monitor the progress of other stakeholders, and coordinate with other relevant partners involved in the process. Membership in the ICC/CS includes the RCHU, Public Health Division, Supplies Directorate, private manufacturers and distributors, and other partners. In 2003 the ICC/CS formed a smaller technical working group among its members to complete the development of a national contraceptive security strategy. The responsibilities of this group will be to carry forward the issues identified in the workshop, promote collaboration and communication on them, and integrate the strategy into the MOH's Programme of Work.

Establishing Leadership and Coordination

From these initial discussions, a committee – variously referred to as a contraceptive security working group, coordinating committee, or task force - can be established to lead the development, implementation, and monitoring of a national contraceptive security strategy. This committee draws together stakeholders to define a common vision; agree upon goals and objectives; delineate roles, responsibilities, and use of resources; and identify areas of collaboration for making progress in contraceptive security. The committee should include representatives of the main constituency groups for contraceptive security. It can be led and convened by the national government, with support from other members.

The committee also provides and receives feedback from a larger group of stakeholders on a regular basis, monitors and evaluates progress towards contraceptive security, and commissions studies to inform the process. These might include a market segmentation study, contraceptive forecasts and financing projections, a national health subaccount for reproductive health, or, if needed, a more detailed assessment of the status of contraceptive security in a country (see Lesson 2).

Keep the Process Moving

Holding workshops and establishing a coordinating committee are important steps, but only the start of a long-term process, lasting at least five to ten years, perhaps longer. Missions can help maintain momentum by ensuring stakeholders meet regularly and the process moves ahead in a purposeful way, with concrete workplans and milestones. They can support a secretariat for the coordinating committee, and help build a sound information base for planning and decision making (e.g., technical assistance for contraceptive forecasts and other analyses).

Revitalizing Efforts to Increase Contraceptive Security in Bangladesh



Dramatic increases in contraceptive use and social acceptance of family planning in Bangladesh have made the country a success story. They have also, though, created a large and still growing “mortgage” of supply needs. Without the continued widespread availability of contraceptives and an expansion in access to clinical methods, the gains in family planning in Bangladesh over the past several decades will be lost.

To refocus attention on contraceptive security in Bangladesh, USAID and partners adopted a multistakeholder, multidisciplinary approach to guide a year-long process of assessment and coalition building. The conceptual framework used in Bangladesh to illustrate the important relationships inherent in contraceptive security became a successful prototype in the subsequent development of the SPARHCS approach (see Lesson 2). Key steps were:

- The Ministry of Health and Family Welfare (MOHFW) first convened small groups of key stakeholders to raise awareness and begin to identify priorities.
- Long-range commodity and financing forecasts were prepared.
- And, based on the stakeholder discussions and forecasts, a white paper was drafted on the status and prospects for contraceptive security in Bangladesh.

After several months of groundwork, a major symposium (a national launch for contraceptive security activities) was held in June 2002. Three key priorities were agreed upon for the development and implementation of a contraceptive security strategic plan:

- (1) Improve segmentation of the family planning marketplace to mobilize more household financing and make more effective use of public subsidies.
- (2) Ensure continued functioning of the national supply chain and improve its efficiency.
- (3) Support access to a range of quality services, with a focus on increasing access to long-term and permanent methods.

Following the symposium, policymakers and program managers met to construct strategies for addressing these priorities. Specific activities now underway include a market segmentation strategy, as well as a communications strategy to promote the private sector's role in contraceptive security. Stakeholders have proposed that a Contraceptive Security Task Force be established by the MOHFW to oversee progress.

Further Reading

Ghana Ministry of Health, et al. 2002. *Meeting the Commodity Challenge: Securing Contraceptives and Condoms for Ghana*. Arlington, Va.: Deliver Project/John Snow, Inc. (http://www.deliver.jsi.com/2002/PA/pa_Papers/index.cfm). [Report from the 2002 workshop held to raise stakeholder awareness of Ghana's contraceptive security and to begin developing a national strategy.]

Hudgins, A.A. 2002. *A Consequence of Success: The Issue of Contraceptive Security in Bangladesh*. Arlington, Va.: Deliver Project/John Snow, Inc. (http://www.deliver.jsi.com/pdf/pa/bangla_whitepaper.pdf). [Explores the conditions for contraceptive security in Bangladesh, prepared as technical support for a symposium to launch contraceptive security activities.]

Policy Project, Deliver Project, and Commercial Market Strategies. 2002. *Developing a Common Understanding of Contraceptive Security: Contraceptive Security Workshop Report, November 3-4, 2002, Amman, Jordan*. Washington, D.C.: Policy Project/Futures Group International. [Outlines the approach, process, and results of a contraceptive security workshop in Jordan.]

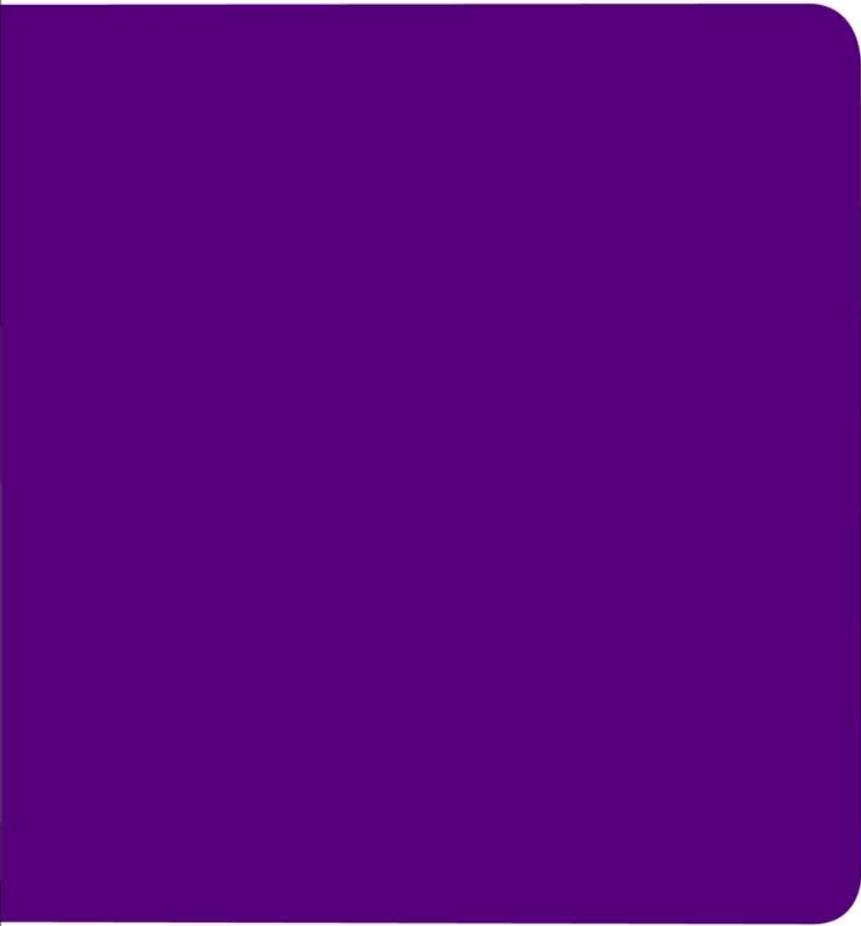
The USAID Contraceptive Security Team works to advance and support planning and implementation for contraceptive security in countries by:

- developing and supporting the use of appropriate strategies and tools for contraceptive security,
- improving decision making for contraceptive security through increased availability and analysis of data, and
- providing leadership at the global level.

The team provides technical assistance to Missions and partners in research and analysis, strategic planning and programming, monitoring and evaluation, and design and implementation of field activities. For further information, please contact:

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